

# Supervisory and Administrative Standard Review Form

**Date:****Agency Name:**

Coordinator Name:

Number of Staff Supervise:

Supervisor Name:

Number of Staff Supervise:

Other Supervisors:

Number of Staff Supervise:

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**Staff Contact**

Supervisor meets with staff at least two times per month: (standard 28)

How are meetings conducted? 1 on 1

Group

Combination

Where do the meetings take place?

**Group Meeting**

- Was a group meeting attended by the reviewer? Yes No
- Agenda provided? Yes No (Attach a copy of the agenda)
- Does agenda include staffing of some families? Yes No
- If yes, did the group share ideas and techniques in working with specific families? Yes No

**One on One Meetings** Was a one on one meeting attended by the reviewer? Yes No

- Is there documentation to show that the entire case loads of the specialists were reviewed monthly?  
Yes No (Standard 27)
- As necessary, was the service intensity of the family discussed and modified, if necessary? Yes No  
(Standard 11) (This is also part of the file review)
- Families enrolled are reviewed during the third month of enrollment to determine appropriate level of intensity and address plan for a goals of the family? Yes No (Standard 10)
- Supervisor's conduct routine file reviews in the third month and at exit? Yes No (Standard 29) (This is also part of the file review)
- What method does the supervisor use to track contact with Specialist (one on one, group meetings), how entire caseload is address, and 3 month families? (Describe: ie tracking form, provide a copy if possible)

**Administrative**

- Waiting Protocol contains required information? Yes No (Standard 2)
- Referral Process contains required information? Yes No (Standard 2)
- Family files are kept in a locked storage cabinet with limited access? Yes No (Standard 34)
- Grantee has a policy in place? Yes No (Standard 34)
- Grantee has one staff trained by DCAA to provide Code of Ethics and the Data Collection Tools?  
Yes No (Standard 31)

**Trainer:**

Additional Comments: